

# GENERAL FACT SHEET

BILL NUMBER 10A-8

BRIEF TITLE <u>Business Card and Letterhead Printing</u>	APPROVED DEADLINE _____	REASON _____
_____	_____	_____
_____	_____	_____

DETAILS		POSITIONS/RECOMMENDATIONS
Approval of multi-year contract for printing of business cards and letterhead.	Sponsor	Recommend approval
	Program Departments, or Groups Affected  <u>All Depts.</u>	All automated departments
	Applicants/Proponents	Applicant City Clerk's Office  City Department Finance  Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals  Basis of Opposition
	Staff Recommendations	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

## DETAILS

## POLICY/PROGRAM IMPACT

<p>Business card and letterhead layout has been done by CIC in the past. CIC would also coordinate orders and send to the selected vendor. The new contract includes an electronic ordering system that provides online ordering and order tracking by the Users.</p>	<b>POLICY OR PROGRAM CHANGE</b>	<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <u>All orders will be placed electronically directly to Vendor.</u>	
	<b>OPERATIONAL IMPACT ASSESSMENT</b>	   	
	<b>FINANCES</b>		
	<b>COST AND REVENUE PROJECTIONS</b>	COST of total project: Est. \$25,000.00 COST of this Ordinance/ Resolution \$25,000.00	
		RELATED annual operating Costs \$ 0	
		INCREASE REVENUE EXPECTED/YEAR \$ -	
<b>SOURCE OF FUNDS</b>	CITY [Approximately]		
	_____	\$ _____ %	
	_____	\$ _____ %	
	_____	\$ _____ %	
	_____	\$ _____ %	
	_____	\$ _____ %	
	NON CITY [Approximately]		
	_____	\$ _____ %	
	_____	\$ _____ %	
	_____	\$ _____ %	
<b>BENEFIT COST</b>			
<input type="checkbox"/> Front Foot _____ Average Assessment			
<input type="checkbox"/> Square Foot \$ _____ \$ _____			

APPLICABLE DATES:

FACT SHEET PREPARED BY: Bob Walla

REVIEW BY:

REFERENCE NUMBER